

with notes complete

SWINTON AND PENDLEBURY URBAN
SANITARY DISTRICT.

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

AND THE

INSPECTOR OF NUISANCES.

1896.

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ANNUAL REPORT

OF

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1896.

TO THE CHAIRMAN AND MEMBERS OF THE SWINTON AND PENDLEBURY URBAN DISTRICT COUNCIL.

GENTLEMEN,

In the course of the year 1896 there was registered in the above district a total of 803 births (males, 421 ; females, 382) and 478 deaths (males, 235 ; females, 243), apportioned as under :—

BIRTHS.

SWINTON, 420 (Males, 224 ; Females, 196) :—

	Males.	Females.		
North Ward	135	96	= 231	} 420
South Ward	89	100	= 189	

PENDLEBURY, 383 (Males, 197 ; Females, 186) :—

	Males.	Females.		
West Ward.....	116	112	= 228	} 383
East Ward.....	81	74	= 155	

DEATHS.

SWINTON, 209 (Males, 95 ; Females, 114) :—

	Males.	Females.		
North Ward.....	54	72	= 126	} 209
South Ward.....	41	42	= 83	

PENDLEBURY, 215 (Males, 109 ; Females, 106) :—

	Males.	Females.		
West Ward.....	62	72	= 134	} 215
East Ward	47	34	= 81	
Swinton Industrial Schools	3	0	= 3	
Children's Hospital, Pendlebury.....	28	23	= 51	

The population estimated to middle of 1896, was as under :—

SWINTON, 14,250 ; PENDLEBURY, 10,750 ; SCHOOLS, about 600 ; HOSPITAL, about 300 = 25,900.

North Ward.....	6,900	West Ward.....	6,550
South Ward.....	7,350	East Ward	4,200

On this basis, therefore, the following were the

Birth-rates per 1,000 Population—

SWINTON, 28·77.	PENDLEBURY, 35·60.
North Ward..... 33·47	West Ward..... 34·80
South Ward..... 25·71	East Ward 36·90

Death-rates per 1,000 Population—

SWINTON, 14·66.	PENDLEBURY, 20.
North Ward..... 18·26	West Ward..... 20·45
South Ward..... 11·29	East Ward..... 19·28

The *General district Birth-rate* was 32·16, and the *Death-rate* 16·96 per 1000, these figures being *exclusive* of the Industrial Schools and Children's Hospital. *Including* the Schools (with an approximate population of 600), the *general death-rate of Swinton* was 14·27 per 1000; and *including* the Children's Hospital (with an approximate population of 300), the *general death-rate of Pendlebury* was 20·40 per 1000. *Inclusive* of these public institutions the *death-rate of the whole area of the district* was 18·45 per 1000.

The *Infant Death-rates* (per 1000 births) were:—

SWINTON, 133·3.	PENDLEBURY, 221·9.
North Ward..... 181·8	West Ward..... 214·8
South Ward..... 79·3	East Ward 232·2

That of the *whole area of the district* being 186·8.

These figures, I may say, indicate an improved condition of things in regard to Swinton (as compared with the two previous years). In Pendlebury the general mortality and infant death-rates show the latter to be slightly in excess and the former about the same as in those years.

The total number of cases of *Infectious Disease* notified to me during the year was 234—Swinton 108, Schools 5, Pendlebury 121. They will be found classified into ages and localities under Table B appended to my report, and at a later stage I shall comment upon them in detail. I may, however, say here that this is the lowest total I have recorded since the year 1893 (the previous year's total being 569), and would remark in passing that the yearly average since the Notification Act came into operation, in 1889, has been 285.

Of this number eight cases were treated in the hospital, and two died there. The cases arising in the Swinton Industrial Schools are all sent to Monsall Hospital.

I invite your attention to the following five tables of comparative mortality, per 1000 population, under the heads of:—

1. Under the age of one year.
2. Zymotic diseases.
3. Diseases of the Lungs.
4. "All other," or unclassified, diseases.
5. At different ages.

Table I. *Infant Death-rates.* In examining this table it will be seen that this rate is slightly *higher* in the North Ward, and rather *lower* in the South Ward, as compared with 1895, and that both in the West and East Wards (and especially in the latter) the rate is considerably *higher* than in 1895. We have, in fact, to go back to the years 1894 and 1891 for anything like a similarly high rate of infant mortality in Pendlebury. The rate is rather higher than usual for North Ward (181·8 per 1000), whilst for South Ward an extremely low rate is recorded (only 79 per 1000).

The principal causes of this high rate are such as I have frequently commented upon in former reports. Amongst them are (1) improper and irregular food, (2) heredity, (3) wasting disease (general and local), (4) immaturity, (5) insufficient clothing and the effects of undue exposure to cold. Information on most of these points is, nowadays, so readily accessible to all who will take advantage of the many facilities afforded for obtaining it, that there should be little difficulty on the part of mothers in so guarding young children as to tide them at least over what is by far the most precarious period of their lives. In factory districts like ours it is often the case that circumstances compel young mothers to resume their work before they have properly recovered from the effects of childbirth, and the results to both mother and child are too frequently seen in the wasting of the latter, and perhaps the permanent physical weakening or disabling of the

former. I believe there is an Act of Parliament in existence which prohibits the employment of females in any laborious occupation within one month of their confinement, but it is to be feared that this, like many other enactments, is practically a dead letter. Hereditary and wasting diseases always play a very large part in their influence on the infant death-rate, especially so in large and crowded populations; but this, I fear, is a cause which is, strictly speaking, beyond the control of a sanitary authority, and must rather be remedied by moral education than by legal enactments. Be the cause, or be the remedy what it may, however, it is certain that when we regard the appalling fact that out of every 1000 children born in West Pendlebury, 214, and in East Pendlebury, 232, die before they reach the age of one year, we can all see how great is the necessity for giving it our most earnest consideration, and do whatever lies in our power, whether as sanitarians, philanthropists, moral educationists, or legislators, to lessen this great mortality. Chief of the causes to which these infant deaths were assigned in the Pendlebury wards were as hereunder:—

	Measles.	Scarlet Fever.	Croup.	Whooping Cough.	Diarrhoea.	Erysipelas.	Bronchitis and Pneumonia.	Heart Disease.	Convulsions.	Premature Birth.	Wasting Diseases.	Inflammation of Bowels.	Brain Disease.	Defective Formation.	Debility.
West .....	..	..	1	3	5	1	4	1	8	4	13	1	3	3	3
East	1	1	..	..	..	..	8	..	6	1	11	5	..	..	..

TABLE I.—Under the Age of One Year.

	1896.	1895.	1894.*	1893.	1892.	1891.	1890.
SWINTON—							
North Ward	6·08	5·78	} 6·07	6·07	4·83	5·80	3·84
South Ward	2·04	3·85					
PENDLEBURY—							
West Ward	7·48	6·12	} 7·31	7·06	6·17	8·40	5·70
East Ward	8·57	5·32					

* The figures given in these Tables for the year 1894 and previous years were for the whole of Swinton and the whole of Pendlebury respectively, prior to the division of the district into separate Wards.

TABLE II.—ZYMOTIC DISEASES.

(Scarlet Fever, Diphtheria, Measles, Whooping Cough, Typhoid Fever, Diarrhœa.)

	1896.	1895.	1894.*	1893.	1892.	1891.	1890.
SWINTON.							
North Ward—							
Under 5 years..	3·76	2·52	Under 5... 3·51	1·60	1·40	3·40	1·19
5 and over.....	0·57	0·59					
South Ward—							
Under 5 years..	0·68	2·75	5 and over 0 65	0·66	0·47	0·50	0·46
5 and over.....	—	—					
PENDLEBURY.							
West Ward—							
Under 5 years..	2·45	2·98	Under 5... 3·88	1·07	0·30	2·10	0·79
5 and over.....	1·06	2·04					
East Ward—							
Under 5 years..	0·95	1·21	5 and over 0·89	—	0·10	1·70	0·79
5 and over.....	0·71	—					

TABLE III.—DISEASES OF THE LUNGS.

	1896.	1895.	1894.*	1893.	1892.	1891.	1890.
SWINTON.							
North Ward—							
Under 5 years..	1·59	2·07	Under 5... 2·94	1·80	1·81	3·20	2·51
5 and over	3·62	4·14					
South Ward—							
Under 5 years..	0·54	0·96	5 and over 3·85	4·53	4·09	5·10	3·97
5 and over	1·76	2·06					
PENDLEBURY.							
West Ward—							
Under 5 years..	2·01	2·04	Under 5... 2·23	2·61	3·54	3·20	1·90
5 and over	3·05	3·45					
East Ward—							
Under 5 years..	2·38	2·17	5 and over 3·28	4·15	4·78	5·40	4·70
5 and over	1·42	2·42					

* The figures given in these Tables for the year 1894 and previous years were for the whole of Swinton and the whole of Pendlebury respectively, prior to the division of the district into separate Wards.

TABLE IV.—“ALL OTHER,” OR UNCLASSIFIED DISEASES.

	1896.	895.
SWINTON—		
North Ward... { Under 5 years	3·76	3·56
{ 5 and over.....	3·18	2·81
South Ward... { Under 5 years	2·44	3·16
{ 5 and over.....	3·94	2·34
PENDLEBURY—		
West Ward ... { Under 5 years	6·71	5·18
{ 5 and over.....	3·81	3·45
East Ward { Under 5 years	7·14	6·05
{ 5 and over.....	4·28	4·59

TABLE V.—AT DIFFERENT AGES.

	1 Year and Under 5.	5 Years and Under 15.	15 Years and Under 25.	25 Years and Under 65.	65 Years and Over.
SWINTON—					
North Ward { 1896...	3·18	1·01	1·01	4·78	2·17
{ 1895...	2·81	0·59	1·18	5·34	2·07
*1894...	4·70	0·85	0·85	5·68	2·09
South Ward { 1896...	1·90	0·54	0·27	2·85	3·65
{ 1895...	3·16	0·68	0·27	2·47	2·89
PENDLEBURY—					
West Ward..... { 1896...	3·20	0·76	0·76	5·49	2·74
{ 1895...	4·39	0·93	1·09	5·33	3·14
*1894...	4·03	1·49	—	4·47	1·34
East Ward { 1896...	1·90	0·95	0·95	4·28	2·61
{ 1895...	4·11	1·45	—	6·29	1·69

* The figures given in these Tables for the year 1894 and previous years were for the whole of Swinton and the whole of Pendlebury respectively, prior to the division of the district into separate Wards.

A.—TABLE OF DEATHS

DURING THE YEAR 1896, IN THE SWINTON AND PENDLEBURY URBAN SANITARY DISTRICT, CLASSIFIED ACCORDING TO DISEASES, AGES, AND LOCALITIES.

NAMES OF LOCALITIES adopted for the purpose of these statistics; public institutions being shown as separate localities. (Columns for population and Births are in Table B.)	MORTALITY FROM ALL CAUSES, AT SUBJOINED AGES.							MORTALITY FROM SUBJOINED CAUSES, DISTINGUISHING DEATHS OF CHILDREN UNDER FIVE YEARS OF AGE.																						
	At all ages.	Under 1 Year.	(d) 1 and under 3.	(e) 5 and under 15.	(f) 15 and under 25.	(g) 25 and under 65.	(h) 65 and upwards.	(i)	1	2	3	4	FEVERS.					10	11	12	13	14	15	16	17	18	19	20	21	
													Typhus.	Enteric or Typhoid.	Continued.	Relapsing.	Puerperal.													
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	Smallpox.	Scarlatina.	Diphtheria.	Membranous Croup	Typhus.	Enteric or Typhoid.	Continued.	Relapsing.	Puerperal.	Cholera.	Erysipelas.	Measles.	Whooping Cough.	Diarrhoea and Dysentery.	Rheumatic Fever.	Phtisis.	Bronchitis, Pneumonia and Pleurisy.	Heart Disease.	Injuries.	All other Disease.	Total.	
SWINTON:—	126	42	22	7	7	33	15	{ Under 5 5 upwds	..	5	..	..	..	..	2	..	..	..	..	..	5	4	12	..	1	10	..	1	26	64
North Ward.....								{ Under 5 5 upwds	..	1	..	..	..	..	3	..	..	..	..	..	..	1	1	1	5	20	8	2	22	62
South Ward.....	83	15	14	4	2	21	27	{ Under 5 5 upwds	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	1	11	6	4	1	18	29
PENDLEBURY:—								{ Under 5 5 upwds	..	1	..	1	..	..	4	..	..	..	..	1	1	7	5	..	..	14	1	1	38	70
West Ward	134	49	21	5	5	36	18	{ Under 5 5 upwds	..	1	..	..	1	..	3	..	..	..	..	..	2	1	1	1	6	14	11	..	25	64
East Ward	81	36	8	4	4	18	11	{ Under 5 5 upwds	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	10	3	7	30	44	
Swinton Industrial Schools	3	..	1	2	..	..	..	{ Under 5 5 upwds	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1	..	..	..	..	1
Pendlebury Children's Hospital	51	8	27	15	1	..	..	{ Under 5 5 upwds	..	6	2	..	..	..	1	..	..	..	..	..	..	..	1	..	3	3	3	2	20	35
Total....	478	150	93	37	19	108	71	{ Under 5 5 upwds	..	13	2	2	..	..	11	..	..	..	..	1	12	13	18	..	4	41	2	3	132	243
									..	8	..	..	..	..	..	..	..	..	..	..	..	1	2	3	16	50	31	15	98	235

Area of District (in Acres), 2,222.

Population (Census 1891), 21,624 (including Swinton Schools).

Population (estimated to middle of 1896), 25,900 (including Swinton Schools and Children's Hospital).

Death Rates—General, 16·96 per 1000 population (estimated to middle of 1896), excluding Children's Hospital, Pendlebury, and also Swinton Schools.

Infants (under one year of age), 186·8 per 1000 Births Registered.

B.—Table of Population, Births, and of New Cases of Infectious Sickness,
 COMING TO THE KNOWLEDGE OF THE MEDICAL OFFICER OF HEALTH, DURING THE YEAR 1896, IN THE
 SWINTON AND PENDLEBURY URBAN SANTARY DISTRICT; CLASSIFIED ACCORDING
 TO DISEASES, AGES, AND LOCALITIES.

NAMES OF LOCALITIES adopted for the pur- pose of these Sta'tistics; Public Institutions being shown as sepa- rate localities.	POPULATION AT ALL AGES.		Regis- tered Births.	Aged under 5 or over 5.	NEW CASES OF SICKNESS IN EACH LOCALITY, COMING TO THE KNOWLEDGE OF THE MEDICAL OFFICER OF HEALTH.												NUMBER OF SUCH CASES REMOVED FROM THEIR HOMES IN THE SEVERAL LOCALITIES FOR TREATMENT IN ISOLATION HOSPITAL.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																											
	Census 1891.	Esti- mated to middle of 1896			(b)	(c)	(d)	(e)	Smallpox.	Scarlatina.	Diphtheria.	Membranous Group.	FEVERS.					Cholera.	Erysipelas.	Totals.	Smallpox.	Scarlatina.	Diphtheria.	Membranous Group.	FEVERS.					Cholera.	Erysipelas.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
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SWINTON	21,068	{ 14,250	803	{ Under 5 5 upwds Under 5 5 upwds

Total cases treated in Hospital = 8. Deaths 2.

Notification compulsory since December 4, 1889.
 Isolation Hospitals—
 Monsall Hospital, Manchester (without the District).
 Children's Hospital, Pendlebury (within the District).

It will be seen, therefore, that the great bulk of the cases were those arising, *a*, from tubercular, or wasting diseases, *b*, from convulsions, and *c*, from lung disease, and these results usually follow upon causes such as I have before mentioned. For example, we see in the large number of deaths from wasting diseases—commonly known as marasmus, and various forms of tubercular disease—the great influence which hereditary predisposition exercises. Similarly, in the deaths from convulsions and inflammation of the bowels, we have evidence both of the ill-effects of over-feeding and of improper food given to infants, either through gross ignorance or palpable neglect; whilst in regard to the columns under the headings of “Premature Birth,” “Bronchitis and Pneumonia,” “Diarrhœa,” and “Debility,” it is equally apparent to what the results may probably be attributed. A little more care and attention given by mothers to the vital question of properly feeding and clothing their offspring, and a still more persistent endeavour on the part of school authorities and Technical Instruction Committees in training and instructing the rising generation in the principles of household management, sick nursing, and dietetics would, I feel confident, be productive of the best results, and would go very far to considerably minimise the evil.

Into other causes which undoubtedly operate to produce our high infant death-rate it is perhaps unnecessary for me to enter, as it is well known they are such as are absolutely preventable; they are of a personal rather than a general nature, and are associated with conditions over which a Sanitary Authority, as such, has little or no control.

Table II. *Zymotic Diseases*. Included in this group are the infectious diseases, such as small-pox, measles, scarlet fever, diphtheria, whooping cough, typhoid fever, and diarrhœa. Of the first-named we have, fortunately, had no case during the past year. Taking the two chief infectious diseases from which the district has suffered (*i.e.*, scarlet and typhoid fevers), we find that altogether there were 100 cases of the former—including two at the Industrial Schools—with a mortality of 21, including 12 at the Children’s Hospital; and 80 cases of the latter, with a

mortality of 11, including one at the hospital. It will be observed that the largest proportion of the scarlet fever cases occurred in the North and West Wards, and that these two wards, together with the East Ward, furnished the largest number of typhoid cases. I do not think these latter always and entirely arise from specific insanitary conditions (such as bad smells, ineffective drainage, foul air, tainted food, or impure water) in the particular localities affected—although these have sometimes in the course of investigation been discovered to be present—but I believe the disease to have often been contracted apart and away from the home surroundings, and, in not a few instances, it has been incurred outside the district. We are often told, for example, that miners who have contracted the disease have been working under conditions which subject them to the influence of foul smells arising from decayed vegetable matter, dried excreta, &c., whilst at their work in the mine. Being often in a more or less receptive condition they receive the poison into their systems, and on returning home frequently infect the other inmates of the dwelling.

In this way, I believe, many of our typhoid cases are produced, and although there are other causes accountable, to which I shall presently allude, I have little doubt this is a very important one, and it would be well if the attention of all who are engaged in the underground management of coal mines were directed to this matter.

Scarlet fever has, I am happy to say, shewn a considerable diminution compared with the previous year. Leaving the Industrial Schools and Children's Hospital out of calculation, there were 98 cases, with 9 deaths, as against 427 cases, with 24 deaths, in 1895. There has, therefore, not been so great a demand for the isolation of the cases, the total number removed to hospital being only 8, as against 24 in 1895. At the same time it is advisable that the district should be provided with more adequate means of hospital isolation, so as to be ready when the agreement with Monsall Hospital shall expire two years hence. Steps have recently been taken by the Council to supply the want by their taking part in a conference with two neighbouring

authorities with that object in view, and it may reasonably be hoped that some satisfactory arrangement may now soon be arrived at.

Measles and whooping cough produced a distinct mortality of 12 and 14 respectively, the former chiefly in North and South Wards, and the latter in West Ward; whilst diarrhœa accounted for a total mortality of 20, chiefly in North and West Wards—18 being under the age of five years. Looking at the comparative table of death-rates from the Zymotic diseases it will be noted that there is a largely increased rate in the North Ward under the five year limit, as compared with 1895 and previous years (with the exception of 1894 and 1891), a very largely decreased one in the South Ward, and that in the West Ward it is somewhat less. In the latter ward there is a decrease of nearly one half in the over five years of age period as compared with 1895, whilst the other wards are much the same as formerly in this respect. On the whole it may be said that although the death-rate from this important class of diseases is in certain portions of the district higher than it ought to be, we may, I think, congratulate ourselves on some slight improvement. If parents would only bear in mind that such very infectious diseases as measles, scarlet fever, and whooping cough require the exercise of a certain amount of forethought, not only in regard to such home isolation as they can command, but in connection more especially with school attendance; and if school officials would promptly exclude all children coming from an infected dwelling, it is obvious we should very soon see a decided decrease in our annual mortality from these diseases. The closing of any particular school, wherever necessary, can always be adopted, without any loss of Government grant, on certification being made by me that such a course is desirable, and whenever, for example, measles or whooping cough (which are not notifiable diseases under the Act of 1889) are more than usually prevalent in any particular part of the district, I shall, on being made aware of the fact from a reliable source, be pleased to make use of the powers conferred upon me for the purpose of lessening the spread of these diseases.

Table III. *Diseases of the Lungs.* The death-rates in the various wards from this class of disease compare very favourably with recent years, and with one exception—the East Ward—show a distinct falling off as compared with the previous year. In the North and South Wards the mortality was considerably greater above than under the age of five years, whereas in the East Ward it was quite the reverse, and in West Ward both age groups showed an equal rate of mortality. When we consider the occupations of our large population, the varied conditions under which these are carried on, and the variable climate with which they have to contend, it does not appear to me that our respiratory death-rate is very unusually or exceptionally high. As, however, I have previously indicated, there is much room for improvement in the management of the health of young children and infants, who are too often insufficiently clad and imperfectly protected against the subtle influences of damp and cold.

Table IV. *The Unclassified Diseases*—which embody those not tabulated under any distinct heading. Many of these have been referred to, but they also include such cases as cancer, apoplexy, paralysis, senile decay, and the various affections of the brain, liver, kidneys, and other internal organs, &c. The mortality under this head showed no very marked increase except in the Pendlebury Wards under the age of five years, and in the Swinton Wards over that age.

Table V. *At Different Ages.* The feature of this table is the notable decrease in the “one to five years” column in the South, West, and East Wards respectively, as compared with the previous year. It is to be observed, also, that the South and East Wards both exhibit a somewhat higher rate in the “65 years and over” column than in 1895, whilst the North Ward is fractionally in excess, and West Ward somewhat lower, than in that year.

In the early part of the year, on account of the occurrence of a rather larger number of typhoid cases than usual, I recommended the provision of pails to all infected houses for the purpose of dealing more effectively with the patients' *excreta*. You promptly adopted my suggestion, with, I am glad to say, satisfactory results. The state of the closets in a part of East Ward

also received attention at this time, and the subject was adequately dealt with. The condition of the closets in three of the mills in West Ward was also the subject of investigation by the Inspector and myself at this and a later period. I made certain recommendations to you in connection therewith, which were adopted and carried out. It is no doubt difficult to keep mill closets in as satisfactory a state of cleanliness as could be wished, but a little more effective supervision would perhaps mend matters, and a prompt removal of ascertained nuisances, with a more periodical system of limewashing, would tend to lessen the probability of the workers contracting disease.

In the month of June I reported on the condition of the piggeries belonging to Pendleton Co-operative Society, situated off Worsley Road, Swinton, and also on the large refuse tip in Carrington Street, Pendlebury, belonging to Messrs. Knowles and Sons, Limited. Some steps were taken to lessen the very serious nuisance arising from the latter, but up to a recent date these had not been attended with satisfactory results, and I recommend that the attention of the owners be again called to it and until some adequate remedy is provided.

In the second quarter of the year I advised you to have our smaller as well as our main streets more frequently and systematically watered during periods of dry and dusty weather, and this is a matter to which I hope you will give closer attention during the ensuing and subsequent years. A matter which occupied my attention in July was that of nuisances, said to arise from pig-keeping in a part of East Ward. The Inspector and I reported to you thereupon, with, I believe, satisfactory effect. I wish to emphasise the necessity for strictly carrying out the bye-laws affecting this practice, the importance of which in a dense population like we have in Pendlebury, and also in some parts of Swinton, cannot well be over-estimated.

I also called your attention in the month of July to the desirability of having the ash-pits—particularly in the more crowded localities—emptied in the later part of the day instead of under the scorching influences of a blazing noonday sun. This would, of course, entail additional expense and trouble, but when it is

considered how often we notice raw *excreta* (unmixed with ashes) and various kinds of decayed refuse allowed to remain in the open street for some time before being carted away, it will readily be understood how the heat of a typical summer day may be likely to cause infection and subsequent disease in weakly persons and young children. You will remember I mentioned to you at the time that I had received a communication from a medical man in the district who complained that one of his patients had contracted infective diarrhoea through what he believed to be this cause. I would again urge, therefore, that the practice in vogue in large towns, *e.g.*, Salford and Manchester, should henceforth be adopted in this district during the hot summer months.

In August Councillor Williams, the Sanitary Inspector, and myself visited some dwellings in a portion of East Ward which were in an insanitary state, and as a result of this investigation I made recommendations, afterwards adopted by the Council, which, so far as I can learn, proved effective. The question of distributing manure over a portion of a field causing a nuisance to an adjoining dwelling was also one with which I was called upon to deal during this month, and the steps I advised to be taken as a remedy were in due course adopted by the Council.

At the end of October I reported on the slight prevalence of measles in Moorside, a portion of South Ward. This, however, necessitated the closing of Holyrood School for two or three weeks; since then I have not learnt that there has been any extension of the disease. There has been a large number of cases of measles during the year, and no doubt the school attendances have been greatly affected thereby; but a reference to the mortality table does not show, by any means, a high death-rate from this cause, and it is certain we have had much less than in some previous years.

During the last quarter of the year typhoid fever again proved to be rather prevalent, and the Inspector and I were largely engaged in endeavouring to trace out its origin in each locality. I gave what I considered to be the cause in many of the individual cases, which, as I have stated earlier on in my report, occurred principally in the Pendlebury Wards. One cause I have already dwelt on. Another will probably be found in the insanitary con-

dition of back-yards and gullies, and the overcrowded state of many of the dwellings. A special inspection of West Ward was made in the last month of the year by a sub-committee of the Council, composed of Councillors Hampson and Buck, accompanied by the Sanitary Inspector and myself; but as the consequent report has not yet been presented to the Council I will merely say that the condition of the back-yards—most of them neither paved nor flagged in the slightest degree—of the gullies and of the closets, was found in many places to be very unsatisfactory. To that sub-committee a report was presented by me, in which I set forth what I advised should be done, and in due course I have no doubt the Council will do whatever lies within their powers to ensure a better condition of things.

I frequently observe, in the course of my periodical inspections, particularly in the East and West Wards, and in many of the older blocks of dwellings, the sanitary condition of the closets is not at all what it should be, the accommodation per house being of a very insufficient kind, the buildings themselves inadequately protected from the weather, and inconveniently crowded up close to the dwellings. This is an evil for which it does not appear easy to provide such a drastic remedy as the nature of the case really requires. I would state, however, that in certain portions of Pendlebury where this condition of things is found to exist in its worst form, the rate of mortality and the proportion of infectious diseases recorded have, at least so far as the past year is concerned, proved to be no higher, but on the contrary somewhat lower, than in other parts which are better provided in this respect. It is a fact that in twelve of the streets with which property of this kind has usually in other years been associated, viz., The Ginnell, Potter's Square, Bold Street, Longshaw Buildings, Alice, Whitley, and Melbourn Streets (known as the "Croft"), Knowles Square, and Albion, Dawson, Cobden, and Harriett Streets (known as "Little Bilston"), there was a mortality of only 34 out of a total for Pendlebury of 215. This fact should not, however, lull us into a false sense of safety and security, because it is obvious that we must not allow the statistics for one year only to unduly influence our judgment and lead us to a fallacious conclusion in the matter.

Arising out of the question of overcrowding in certain parts of the district, and more especially in West Ward, the question of the provision of open spaces and recreation grounds has occupied a considerable amount of attention during the past year, and I am sure you will pardon me for reminding you of the very active interest which has been displayed in this matter by the Chairman of your Sanitary Committee (Councillor Buck), who, as a representative of this particular ward, has persistently brought it to the front. As this is a question which largely concerns the health of a very large section of the population, I may at once say that such provision appears to me to be amply justified from a sanitary standpoint. Further, as the West Ward is the most crowded and congested part of the district, and as the North, South, and East Wards are provided with no less than three recreation grounds of a more or less suitable character, within fairly accessible distances from the population, the inhabitants of the West Ward may, I think, reasonably ask the Council to give their case its early and sympathetic consideration.

During the past year attention has been periodically given by me to the Dairies, Cowsheds, and Milkshops in the district, and I would suggest that the regulations in force for their management should be obtained by each owner and affixed in a prominent position within and upon the premises. I have found them generally well-kept and mostly in a satisfactory condition in regard to the care of the animals, the storage of milk, and the drainage and ventilation of the premises. I may say that during the year several samples of milk have been taken for purposes of analysis, and that all have been found to be pure and genuine.

Periodical inspection of the various Bakehouses have been made, but I have never had occasion to formulate any serious complaint as to their sanitary condition. They always appear to me to be conducted, for the most part, on modern and approved principles, and with a due regard to the general and special health of the workers. I would remind the occupiers, however, that there seems to be a practical disregard of the law which requires the regulations affecting bakehouses which send out bread to the public to be posted in a conspicuous part of the premises for the

guidance of all concerned therein, and would suggest that their attention be forthwith called thereto by the Clerk of the Council forwarding a circular letter to the respective owners, reminding them of their duty in this respect.

Inspections have also been made from time to time under the Factory and Workshops Act, 1891, but I have found no evidences of overcrowding or other insanitary condition on the occasions when I have paid such visits.

From what has been said in a former part of my report, it follows that the general sanitary condition of the district at the close of 1896 was, in many respects, favourable ; though, in others, not quite up to an ideal standard of excellence. The condition of many of the poorer dwellings and the overcrowded state of particular parts of the district are, certainly, two of the most important points with which we shall have to contend as time goes on, but the spirit and enterprise displayed by the Council in acquiring during the past year the Swinton Hall Estate, mainly as a recreation ground for a large part of the district, go far to show how it intends to grapple with these questions, so far as other parts are concerned, in the no distant future. I ought also to say that, besides this, Swinton has, during the year, received, through the munificence of a well-known local family, an additional gift of about 1,350 square yards of land for recreation purposes which, situated as it is in the heart of a largely populated portion of the North Ward, is certain to prove highly beneficial to the general health of the neighbourhood. These are, undoubtedly, steps in the right direction, and supported as they are pretty sure to be, by the united efforts of the Council and the public in this and succeeding years, we may, I trust, look forward to the future with confidence and hope.

I am, Gentlemen,

Your obedient servant,

SAMUEL HOSEGOOD, M.R.C.S., Eng., L.S.A.

Briar Cottage,

Medical Officer of Health.

Swinton, January 18, 1897.

REPORT

OF

INSPECTOR OF NUISANCES.

January to December, 1896.

TO THE CHAIRMAN AND MEMBERS OF THE SWINTON AND
PENDLEBURY URBAN DISTRICT COUNCIL.

GENTLEMEN,

I beg to submit the following summary of Sanitary
Work attended to during the year 1896 :—

- NUISANCES AND REPAIRS, &c., NECESSARY TO PROPERTY.

Defective soil pipes and water-closet arrangements	11
Dilapidated state of closet and ashpit walls and wet ashpits	44
Defective sinkstone pipes, and paving around gullies and the pipes being directly connected with the drains	17
Blocked gullies and drains, and defective condition of same..	58
Defective structural condition of houses — chimney flues, spouting, roofings and ceilings, cellar floors	15
Allowing waste water to lodge on surface of yards, streets, and passages.	21
Dirty state of houses, premises, and yards.....	10
Accumulation of, and deposit of, refuse, vegetables, and decayed fish, &c., in prohibited places	28
Overcrowding	5
Defective state of urinals and manure receptacles.....	12
Unsound food offered for sale (onions)	1
Inefficient emptying of ashpits and clearing afterwards	15
Firing of house chimneys	23
Keeping poultry in house (ducks)	1
Keeping pigs in contravention of bye-laws.....	4

In dealing with the above nuisances and repairs necessary to property, notices have been issued as follows :—

Notices given verbally.....	211
Notices by letter.....	102
Legal notices served.....	27

Legal proceedings have not been required in any of the cases, as, upon the expiration of the terms of the notices, the offenders have either complied with the requirements, or the work has been done by the Council, and the owners have paid the costs incurred for doing of same on completion.

SMOKE TESTING.

Smoke tests have been made of drains connected with various properties—both old and comparatively new—and where the defects have been pointed out to the owners they have been satisfactorily attended to.

SMOKE NUISANCES.

Total number of observations taken 433

Complaints have been made in one or two instances of nuisances arising from the emission of smoke from low chimneys, the owners of which have had their attention drawn to the matter, and the emissions are being carefully watched and due notice taken of their character. In one case legal proceedings were threatened, since which time considerable improvement has been made.

Copies of the observations taken each month are forwarded to the owners or managers of the works dealt with.

LODGING HOUSES.

The one registered lodging house has been repeatedly visited, and is kept in a satisfactory condition; visits have also been made to other “not common” lodging houses, but no special fault or overcrowding has been detected.

DAIRIES, COWSHEDS, AND MILKSHOPS.

	Swinton.	Pendlebury.	Total.
Keepers of cows	16	8	24
„ dairies	5	4	9
Other vendors of milk, not residents, supplying the district...			17

The periodical inspections paid to the above, together with the action of the owners on suggestions given, have resulted in the places being kept in good sanitary condition.

SLAUGHTER HOUSES.

Swinton.....	9	Pendlebury.....	10
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These have been regularly inspected and found to be kept generally clean; two or three occupiers have had to be cautioned for delay in removing refuse, &c., and, in several instances, where repairs and alterations have been deemed necessary the occupiers have attended to same.

FOOD AND DRUGS ACT, 1875, AND AMENDMENT ACT, 1879.

The shops and places used for the sale of food and drugs, &c., have been kept under supervision. Thirty-nine samples (as under) have been purchased and submitted to the Public Analyst for analysis, with the result that all were certified genuine.

Butter	16
New milk	19
Pepper	2
Coffee	2

INFECTIOUS CASES.

Nature of case and number notified:—

Scarlet fever	98
Typhoid fever	67
Enteric fever.....	9
Diphtheria.....	9

Number of visits paid to infected houses for the purposes of inspecting, ascertaining particulars, cautioning householders, removing patients, and disinfecting	538
Number of rooms disinfected.....	221
Number of patients removed to hospital	10

DISINFECTANTS.

Carbolic Soap and Powder has been freely given to those in charge of infectious cases.

During the year the system of providing pail tins for the deposit of all waste, &c., from typhoid patients has been adopted, and, with the systematic emptying and disinfecting of same whilst in use, has, I believe, had a beneficial effect.

ASHPITS.

	Number Emptied.	
	Swinton.	Pendlebury.
January to June.....	1,817	1,795
July to December	1,799	1,930
	<hr/> 3,616	<hr/> 3,725
		3,616
		<hr/>
Total.....		7,341

I have the honour to be, Gentlemen,

Your obedient servant,

ALBERT BLEAKLEY,

Inspector of Nuisances.

